1 22-25 32

DATENT ADDITION FOR DETERMINATION								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									1		-0 -	
								<u> </u>	10, 1,	14)	<u> 889</u>	•
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMA TYP		NTITY	OR	•	R THAN ENTITY
TOTAL CLAIMS			39				R/	ATE.	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			39 minus 20=		*' 19		XS	9=		OR	X\$18=	32/2
IN	DEPENDENT C	CLAIMS	/ minus 3 =		* /	1		13=		OR	X86=	86
MULTIPLE DEPENDENT CLAIM PRESENT								45				
* If the difference in column 1 is less than zero, enter "0" in column 2								45=	<u> </u>	OR	+290=	
							TO	TAL	Ļ	OR	TOTAL	1198
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SM	ALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING		HIGHE	EST	PRESENT		_	ADDI-	7		ADDI-
		AFTER AMENDMENT		PREVIO	USLY	EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	##		=	. X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4:	3=		OR	X86=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_		1 1		-
							+14	DTAL		OR	+290= TOTAL	
(Oalum of)								FEE		OR	ADDIT. FEE	
_	 	(Column 1) CLAIMS		(Colum		(Column 3)			4551	1 r		
AMENDMENT B		REMAINING AFTER		NUMB PREVIO		PRESENT EXTRA	RAT	E	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total	AMENDMENT		PAID F	OR			_	FEE	!		FEE
	Total Ind pendent	*	Minus Minus	**		= -	X\$ 9	9=		OR	X\$18=	
	FIRST PRESENTATION OF MU					-	X43=		٠	OR	X86=	
			JETH EE DET	LINDLINI	ODANIVI		+145	5=		OR	+290=	
				TAL		L	TOTAL	•				
		(Column 1)		(Column	: 0\	(Calvers 0)	ADDIT.	FEE L	•		DDIT. FEE	
0	`	CLAIMS		(Colum HIGHE	ST	(Column 3)			ADDI			4001
MEN		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID FO	JSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	_		OR	X\$18=	
	Independent	*	Minus	***		= .	X43	\dashv				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR	X86=	
* 16	the atruit colu-	+145	=		OR	+290=						
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid F r" IN THIS SPACE is I ss than 3, enter "3." **TOTAL ADDIT. FEE												
Ť	he "Highest Num	ber Previously Paid	For (Total or	Independen	ss than t) is the	i 3, enter 3. highest number (opriate box			